## PLEASE FORWARD THIS REQUEST AT LEAST 21 DAYS PRIOR TO THE EVENT

## GEORGIA DEPARTMENT OF AGRICULTURE ANIMAL INDUSTRY REQUEST FOR SPECIAL SALE OR SHOW PERMIT

Name									
Address									
City				State			Zip Code		
Phone Numb	er			•	Fax Number		•	· I	
	ı				I.				
I/we are (che	ck one of	the following):							
		s Establishment	П	Individual	□ Bor	nded A	Auction Compa	ny/Individual	
Licensed/Bonded Sales Establishment									
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Persons sellis	ng livesto	ck, other than ov	vner mii	st be bonded	For informati	ion ca	11 1-800-282-59	852 ext 3725	
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Rodeo; Other	r (Explain	)   🗌							
Name									
Address				•				-	
City				State			Zip Code		
Phone Numb	er				Fax Number				
				SALE INFO					
		Please in	ndicate j	physical add	ress if above is	is a P. (	O. box		
Location (if o	different f	rom above)							
Day Date				Time Check-in Date & Tim			ime		
Type Animal	S			Veterinarian assisting in sale					
PLF	EASE MA	KE SURE TH	E ABOV	E INFORM	IATION IS IN	CLUI	DED IN YOU	R REQUEST	
			S	HOW INFO	RMATION				
		Please in	ndicate ¡	physical add	ress if above is	is a P. (	O. box		
Location (if o	different f	rom above)							
Type An	imals	Day		Date	Show/7	Time	Chec	k-in Date & Time	
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2.									
3.									
4.									
5.									
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Lunderstand	that I/we	are responsible f	for meeti	ng Georgia I	Laws and Rules	s for Sp	pecial Sales or	Shows.	
Cianata				Dogiti			Si on atuma		
Signature				Position			Signature		
	mint NT								
ı P	rint Name	;							

Please mail to: Dr C. Carter Black, III, State Veterinarian and Assistant Commissioner of Animal Industry, 19 M. L. King, Jr. Drive, Room 106, Atlanta, Georgia 30334 or Fax number 404-657-1357. For information all 404-656-3671 or 1-800-282-5852 extension 3671. E-mail: <a href="mailto:cblack@agr.state.ga.us">cblack@agr.state.ga.us</a> Revised 12/15/07